

Maryland State Board of Elections - Campaign Fund Report Summary Sheet

Forms May Be Duplicated As Needed

A. Name of Account (as filed with Election Office) - Friends of Jean Smith, Jean Personel Treasurers acct. B. Account Number (Assigned by election office) - 2713. C. Elective Office - Frederick City Board of Education. D. District Represented - Frederick County. E. Bank Account Information - Bank Name: AN FIRST BANK, Bank Account Number: 970351346.

F. Reporting Due Dates and Transaction Periods. Report Due Date: 8/30/2002. Beginning Transaction Date: 08/06/2002. Ending Transaction Date: 8/25/2002. G. Final Report - Check if report is "final" and account is to be terminated. H. Amendment - This report amends the report Filed on: (Original Report due date)

Table with columns for Column A - TOTALS Current Period, Column B - TOTALS Prior Period, and Column C - TOTALS to Date. Rows include J. Contributions, Transfers in and other Income - Schedule 1, 1A, and 1B; K. Contributions - Schedule 1, Column 4; L. Ticket Purchases - Schedule 1, Column 5; M. Federal Committees - Schedule 1, Column 6; N. Political Clubs - Schedule 1, Column 7; O. Transfers In - Md. Candidate and Slate Accounts - Schedule 1A, Column 10; P. Transfers In - Md. Pol. Party Central Committee Accounts - Schedule 1A, Column 11; Q. Transfers In - PAC Accounts - Schedule 1A, Column 12; R. Loans Received - Schedule 1B, Column 15; S. Other - Schedule 1B, Column 16; T. Total Money Receipts (Col. A Lines K through S) (Col. B & C Lines J1 through S); U. Value of In-Kind Contributions Received - Schedule 1B, Column 17; V. Total Receipts - (Col. A Lines T + U) (Col. C. Lines T + U); W. Expenditures - Schedule 2; X. Salaries and Other Compensation - Column 22; Y. Rent and Other Office Expenses - Column 23; Z. Field Expenses - Column 24; AA. Media - Column 25; BB. Printing and Campaign Materials - Column 26; CC. Direct Mailing by Mail House - Column 27; DD. Postage - Column 28; EE. Purchase of Equipment - Column 29; FF. Expenses of your Fundraising Events - Column 30; GG. Transfers Out to Other Maryland Treasurers - Column 31; HH. Loan Repayment - Column 32; II. Other - Column 33; JJ. In-Kind Contributions Received (enter same figure as line U above); KK. Total Expenditures (add lines X through JJ above); LL. Cash Balance (Subtract line KK, Column C from line V, Column C); MM. Cash Balance in Checkbook at the End of the Report Transaction Period; NN. Cash Balance in Interest Bearing Accounts at the End of the Transaction Period; OO. Balance of Loans at the End of the Transaction Period - Column 42; PP. Outstanding Bills at the End of the Transaction Period - Column 43; QQ. Total Obligations Outstanding. (Add lines OO and PP in Column C).

Under Penalty of Perjury, we declare that we have examined this report, including accompanying schedules, and to the best of our knowledge and belief they are complete and accurate. Signature of Candidate: Jean Smith, Print name of candidate: Jean Smith, date: 8-27-02. Signature of Treasurer: MAUREEN LAPSA, Print name of treasurer: MAUREEN LAPSA, date: 8-27-02.

TT. Signature of Chairman (Required for Committee or Slates Reports only) Printed name of Chairman: date. All Reports Filed Must Bear Original Signatures. Failure to provide all the information required by this form will be regarded as a FAILURE TO FILE. SBE-13-03 (Rev 4-99)

FREDERICK COUNTY BOARD OF ELECTIONS SEP-3 PM 12:31

Schedule 1 - Contributions
 (see schedules 1A and 1B for other types of Income)

See instructions on reverse side

(c) Name of Account Friends of Joan Smith
 (d) Campaign Fund Account Number 2713

| 1 Date Received | 2 Received From | | 3 paid by | | 4 Contributions other than ticket purchases from an Individuals, Corporations, etc. | 5 Ticket purchases by Individuals, Corporations etc. | 6 Contributions from Federal Committees (Include ticket purchases) | 7 Contributions from Political Clubs (include ticket purchases) |
|-------------------------|--|--|-----------------------|------------------|--|---|---|--|
| | Complete Name and Address For entries in columns 6 and 7 list name and address of the entity. | This column must be completed (see reverse side, Column 2) | C H E C K | C A S H | | | | |
| 8/20 | Gordon Coolidge 5386 Bulbat Drive Ijamsville, MD 21754 | Aggregate to Date: \$ 500.00 | ✓ | | \$ 500.00 | Price Per Ticket: \$ | | |
| 8/20 | Paul & Peggy Goebel 2115 Bear Creek Ct Frederick, MD 21702 | Aggregate to Date: \$ 75.00 | ✓ | | \$ 75.00 | Price Per Ticket: \$ | | |
| 8/20 | Kathy Keller 245 Lakeside Dr. Frederick, MD 21702 | Aggregate to Date: \$ 200.00 | ✓ | | \$ 200.00 | Price Per Ticket: \$ | | |
| 8/20 | Richard & Janie Kreuzburg 7911 Opoksumtown Pke Frederick, MD 21702 | Aggregate to Date: \$ 100.00 | ✓ | | \$ 100.00 | Price Per Ticket: \$ | | |
| 8/20 | Miscellaneous Contributions under \$51.00 | Aggregate to Date: \$ | ✓ | | \$ 240.00 | Price Per Ticket: \$ | | |
| | | Aggregate to Date: \$ | | | | Price Per Ticket: \$ | | |
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Failure to provide all the information required by this form will be regarded as a failure to file.

Schedule 1A – Transfers in
From Maryland Treasurers and Out of State Non-Federal Campaign Accounts
(see schedules 1 and 1B for other types of Income)

See instructions on reverse side

(c) Name of Account _____

(d) Campaign Fund Account Number _____

| 8 | 9 | 10 | 11 | 12 | |
|-------------------------|--|--|---|---|---|
| Date Received | Name of the Campaign Account from which the transfer is received | This Column must be completed (see reverse side, Column 9) | From MD Candidate Accounts, Candidate Committee Accounts or State Accounts (Include Ticket Purchases) | From MD Political Party Central Committee Accounts (Include Ticket Purchases) | From MD PACs and Non Federal Out of State PACs (Include Ticket Purchases) |
| | | Aggregate to Date \$ | | | |
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Schedule 1B
Other Receipts and In-Kind Contributions
(see schedules 1 and 1A for other types of Income)

See instructions on reverse side

(c) Name of Account _____

(d) Campaign Fund Account Number _____

| 13 | 14 | 15 | 16 | 17 | 18 |
|-------------------------|------------------------------------|--|--|---|---------|
| Date Received | Complete Name and Address of Payor | Other Receipts | | In-Kind Contribution | Remarks |
| | | Loans Received (Also place on Schedule 3 if unpaid) | Other e.g. Refunds, Rebates, Items Sold, Interest or Other Misc. Income (Describe in Column 18) | Fair Market Value of In-Kind Contribution Received (Describe in Column 18) | |
| | | Aggregate to Date: | | Aggregate to Date: | |
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